

UCC-1 Form

FILER INFORMATION

Full name: **CORPORATION SERVICE COMPANY**

Email Contact at Filer: **RISOSUCCFILINGSV3@CSCGLOBAL.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **CORPORATION SERVICE COMPANY**

Mailing Address: **801 ADLAI STEVENSON DRIVE**

City, State Zip Country: **SPRINGFIELD, IL 62703 USA**

DEBTOR INFORMATION

Org. Name: **EFFIE FILIPPOU'S TWISTED PIZZA, LLC**

Mailing Address: **567 SOUTH COUNTY TRAIL, SUITE 107**

City, State Zip Country: **EXETER, RI 02822 USA**

SECURED PARTY INFORMATION

Org. Name: **BLACKBRIDGE INVESTMENT GROUP FUND I LLC**

Mailing Address: **450 7TH AVE, SUITE 609**

City, State Zip Country: **NEW YORK, NY 10123 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 2697 92770

COLLATERAL

ALL ASSETS.